INFORMATIONAL LETTER NO.1626-MC

DATE: March 7, 2016

TO: Iowa Medicaid Pharmacies

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Managed Care Organization (MCO) Pharmacy Billing Reference

EFFECTIVE: April 1, 2016

Effective April 1, 2016, pharmacy claims for Iowa Medicaid members enrolled in a MCO should be billed to the appropriate MCO or their corresponding Pharmacy Benefit Manager (PBM) to which a member is assigned.

Only claims for Medicaid Fee-for-Service (FFS) members should be submitted to the IME. The designated membership will be available through eligibility determination by calling Eligibility Verification System (ELVS) at 1-800-338-7752 (or 515-323-9639 in Des Moines) or by using the ELVS web portal¹.

Pharmacy claims for members enrolled in an MCO and billed to the Iowa Medicaid FFS program under the corresponding codes in the FFS chart below will reject. The National Council for Prescription Drug Programs (NCPDP) and custom **rejection message** from Iowa Medicaid will be as follows:

AF = PATIENT ENROLLED UNDER MANAGED CARE

Bill MCO Plan Name, Bank Identification Number (BIN#), Processor Control Number (PCN) and MCO telephone number

FFS Plan/Group Name	Processor	RxBIN	PCN
Iowa Medicaid	IME POS Unit (GHS)	011933	IAPOP

The MCO pharmacy billing reference sheet follows, including contact information for each MCO.

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¹ https://ime-ediss5010.noridian.com/iowaxchange5010/LogonDisplay.do